## CITY OF CHICOPEE

Form (Rev. August 2013) Department of the Treasury Internal Revenue Service

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## Request for Taxpayer Identification Number and Certification



Prisi-Con-Con-	Name (as shown on your Income tax return)			<del>and and the Colonian</del> puller puller company of the company of the company of the colonian state of the coloni
Print or type See Specific Instructions on page 2,	Business name/disregarded entity name, if different from	above		
	Check appropriate box for federal tax classification:			Exemptions (see instructions):
	El illulatorasore bubbleto. El a corbonaron El a corbonaron El transcrib.		Exempt payee code (if any)	
	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶		Exemption from FATCA reporting code (if any)	
	Other (see Instructions) Address (number, street, and apt, or suite no.)	k	Requester's name a	and address (optional)
200			· ·	CHICOPEE
See S	City, state, and ZIP code	•	274 FRO	NT STREET
	List account number(s) here (optional)	•	THE CHARGE TO	<u> </u>
Par				
to avol resider entities	rour TIN in the appropriate box. The TIN provided m d backup withholding. For individuals, this is your s at alien, sole proprietor, or disregarded entity, see the , it is your employer identification number (EIN). If y	ocial security number (SSN). However, ne Part I instructions on page 3. For oth	for a	urity number
TIN on page 3.  Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.			dentification number	
Part	II Certification			<del> </del>
	penalties of perjury, I certify that:		-	
	number shown on this form is my correct taxpayer			
Serv	not subject to backup withholding because: (a) I an ice (IRS) that I am subject to backup withholding as inger subject to backup withholding, and	n exempt from backup withholding, or ( a result of a fallure to report all interesi	b) I have not been no t or dividends, or (c) t	otitied by the Internal Revenue the IRS has notified me that I am
	a U.S. citizen or other U.S. person (defined below),			
	ATCA code(s) entered on this form (if any) indicating ation instructions. You must cross out item 2 above			auhiaat ta haalaun withhalding
<ul> <li>because Interest generall instruction</li> </ul>	ation instructions. You must cross out item 2 above you have failed to report all Interest and dividends paid, acquisition or abandonment of secured proper, payments other than interest and dividends, you cons on page 3.	on your tax return. For real estate trans	sactions, item 2 does to an individual retire	not apply. For mortgage ment arrangement (IRA), and
Sign Here	Signature of U.S. person ►	. Da	ate ▶	
<del>,</del>				<del></del>
**Rea	ason for receiving payı	ment		**
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	RETURN IMM	EDIATELY TO ORIGINATING	. K B D B B B B B B B B B	1666979334844844
(DEPAI	RTMENT USE ONLY)	* (TREASUR	ER'S OFFICE	E ONLY)
YENDO	nD #		ECK APPRO	PRIATE ROX
VENDOR # * IF YES- CHECK APPROPRIATE BOX   DEPARTMENT * 1099 YES/NO RECEIVED				
DATE SENT * ( ) BOX 1- RENTS			Proceedings - The Spring of th	
CURRENT CITY EMP YES/NO * ( ) BOX 3- OTHER INCOME				
		* ( ) BOX 7-	SERVICES/G	OODS/SELF EMPL.